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PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE \$1400 \$300 \$1700 05/29/2007 nonprovisional \$0 EXAMINER ART UNIT CLASS-SUBCLASS AUVE, GLENN ALLEN 2111 -710-302000 Change of correspondence address or indication of "Fev Address" (37 CFR 1.363). 2. For printing on the patent from page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. 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